

|                                                                                                                                                        |                |                                                                                                                                                                                   |       |                                                        |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------|---------|-------------|--|
| No. <b>W 90190</b>                                                                                                                                     |                | <b>Due no later than Jan 31, 2016</b>                                                                                                                                             |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>     |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>PENINSULA, LLC<br>FRANK MCDONALD<br>5514 LAKE RIVER LN<br>BOISE ID 83703<br>USA |       | FRANK MCDONALD<br>5514 LAKE RIVER LN<br>BOISE ID 83703 |         |             |  |
|                                                                                                                                                        |                |                                                                                                                                                                                   |       | 3. <u>New</u> Registered Agent Signature:*             |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                |                                                                                                                                                                                   |       |                                                        |         |             |  |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                                                              | City  | State                                                  | Country | Postal Code |  |
| MEMBER                                                                                                                                                 | FRANK MCDONALD | 5514 LAKE RIVER LANE                                                                                                                                                              | BOISE | ID                                                     | USA     | 83703       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 90190</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Frank McDonald<br>Name (type or print): Frank McDonald<br>Date: 11/17/2015<br>Title: Member                                       |       |                                                        |         |             |  |
| Processed 11/17/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                         |       |                                                        |         |             |  |